

# Bringing Accountability/Incentives To LTC

Performance measures compare service activity to an objective, expected standard. When tied to financial incentives for networks and/or network directors, performance measures are powerful management tools.

The Committee recommends that VA implement a series of performance measures for network directors with sufficient financial incentives to encourage the development, enhancement, and maintenance of long-term care services. Measures should be tied to VA's domains of value: access; cost and price; functional status; quality; and satisfaction.

Below are ideas for performance measures linked to VA's domains of value.

## Access To Care

Access to long-term care services raised the most concerns in Committee meetings. VA never intended to provide long-term care to all veterans or even to all veterans enrolled in VA care. Currently, VA provides care to 21.4 percent of Category A veterans who need long-term care.

Idea: VA should adopt a performance measure for Access to Care which rewards networks for:

- Increasing their share of long-term care services to the national VA average; or
- Maintaining their share of long-term care services, if that share is above the national average.

## Cost/Price

The added funding for home- and community-based care will result in a lower average cost for long-term care patients. The reduced cost is not expected to be dramatic because of the continued need for nursing home beds.

Idea: VA should adopt a performance measure for Cost/Price which rewards networks for lowering the average cost of long-term care patients by 5 percent per year. This

measure should be used only in conjunction with meeting the access measure above.

## Quality/Functional Status

The quality of VA's long-term care system will depend on maximizing the functional potential of each user. To achieve this, services must be available and systems must be in place that identify "at risk" patients, assess them appropriately, and coordinate care. While highly evolved indicators for long-term care are still under development, the Committee believes that several structure, process, and outcome measures can be used to assess quality.

Idea: VA should develop a composite Long-Term Care Quality Index, using evidence-based indicators that are realistic and measurable.

*See Appendix E for suggested measures.*

## Patient Satisfaction

The Committee recognizes the challenges in developing surveys for a long-term care population, who may fear retaliation for negative responses or have response limitations due to cognitive impairment. VA's National Bioethics Committee has raised similar concerns.

Typically, information about quality of care or quality of life among institutionalized elderly persons has been obtained from staff or family members in focus groups or on survey instruments. However, research suggests that staff or family information may not be accurate proxies for patient satisfaction responses. Efforts are underway to improve methods to assess nursing home resident satisfaction.

Idea: VA's National Customer Feedback Center should develop reliable patient satisfaction measures for veterans using long-term care services, including those in institutional settings. This program should be a high priority, and once developed, must be operated on a routine basis.